American Opportunity PAC 610 S. Boulevard Tampa, FL 33606

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FEC MAIL CENTER

September 30, 2013

Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

Re: Form 1, Statement of Organization – Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures and, consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in *SpeechNow v. FEC*, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,

Nancy H. Watkins

Treasurer

FEC FORM 1

STATEMENT OF ORGANIZATION

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PONIVI I					Office Use Only
1. NAME OF COMMITTEE (in	ı full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	<u> I</u> İ
American (Oppor	tunity PAC		<u> </u>	
	1_1_1_				
ADDRESS (number a	nd street)	610 S. Boulev	ard .	 	
(Check if an is changed)		Tampa		FL _L	33606
			CITY	STATE	ZIP CODE
COMMITTEE'S E-MA (Check if is change	address	SS (Please provide only one e	-mail address) bertwatkins₁con	n, , , , , , , , , , , , , , , , , , ,	
COMMITTEE'S WEB (Check if is change	address	None			
2. DATE)"]′ 3 0	2013			
3. FEC IDENTIFICATION NUMBER					
4. IS THIS STATE	MENT 🗵	NEW (N) OR	AMENDED (A)		
I certify that I have on Type or Print Name		Nancy H Wa	t of my knowledge and belief atkins	it is true, correct	and complete.
Signature of Treasure	er }	Cotto:		Date 09	<u>'</u> 30° ' 2013``
NOTE: Submission of		·	may subject the person signing		the penalties of 2 U.S.C. §437g.
Office Use Only			For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)

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	rm 1 (Revised 02/2009)	rage Z			
	TYPE OF COMMITTEE Candidate Committee:				
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)				
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)				
Name of Candidate		Z-ragene			
Candidale Party Affiliati	Office Sought: House Senate President	State			
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name of Candidate		1 ! ! 1 1 1			
Party Con		(Damaratia			
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.			
Political A	ction Committee (PAC):				
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a			
	Corporation Corporation w/o Capital Stock	Labor Organization			
	Membership Organization Trade Association	Cooperative			
	In addition, this committee is a Lobbyist/Registrant PAC.				
(f) 🔀	This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	segregated fund or party			
	In addition, this committee is a Lobbyist/Registrant PAC.				
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)				
Joint Fund	draising Representative:				
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, at least one of which is an authorized committee of a federal candidate				
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, none of which is an authorized committee of a federal candidate.	two or more political			
Can	Committees Participating in Joint Fundraiser				
1.	FEC ID number				
2.	FEC ID number				
3.	FEC ID number C				
4.		The state of the s			

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FEC Form 1 (Revised		Page 3	
Write or Type Committee Name American Opportunity PAC			
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative	e, or Leadership PAC Sponsor	
_I Nanellili			
Mailing Address			
Maining Address			
	CITY STATE	ZIP CODE	
Relationship: Connect	ed Organization Affiliated Committee Joint Fundraising Represen	tative Leadership PAC Sponsor	
Relationship: Connect	ou Organization	Leadership FAC Sporisor	
 Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records. 			
Full Name Nanc	y H. Watkins		
Mailing Address	610 S. Boulevard		
	Tampa	33606	
Title or Position	CITY STATE	ZIP CODE	
Treasurer	Telephone number	313, - [254, - [3369]	
A. Transman Habitanasa			
8. Treasurer: List the name a any designated agent (e.g.	and address (phone number optional) of the treasurer of the committe , assistant treasurer).	e; and the name and address or	
Full Name Nanc	cy H. Watkins		
Mailing Address	610 Ş. Boulevard		
	Tampa FL	33606 -	
-	CITY STATE	ZIP CODE	
Title or Position Treasurer	Telephone number	313, _ 254, _ 3369 ,	

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	FEC Forn	1 (Revised 02/2009)	Page 4	 J
	Full Name of Designated Agent	Robert I. Watkins		
	Mailing Address	610 S. Boµlevard		لب
				لب
		Tampa F	I GIGILI LL	لب
	Title or Position Assistant T	reasurer Telephone number	<u> 813, </u>	69
,		Depositories: List all banks or other depositories in which the committee dixes or maintains funds.	deposits funds, holds accounts, rer	nts
	Name of Bank, I			
		The Bank of Tampa		لــــــــــــــــــــــــــــــــــــــ
	Mailing Address	[601 Bayshore Blyd,	<u> </u>	لــــــــــــــــــــــــــــــــــــــ
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		[Taṃpa , , , , , , , , , , , , , , , , , , ,	⁻ L 33606	لـــــ
		CITY STA	ATE ZIP CODE	
	Name of Bank, [Depository, etc.		
	Mailing Address			لـىــ
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		CITY STA	ATE ZIP CODE	

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From: (813) 254-3369 Robert Watkins & Company

610 S. Boulevard Tampa, FL 33606



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PREPARER (8/2013)